BMIT: COMPLETED APPLICATION, TAX

Bayfield County
Planning and Zoning Depart.
PO Box 58
Washburn, WI 54891
(715) 373-6138

BAYFIELD COUNTY, WISCONSIN CAT Bring to thorigh MAR 28 2016 Permit #: Refund: Date:

INSTRUCTIONS: No permits will be issued until all fees are paid. Checks are made payable to: Bayfield County Zoning Department.

Agent Manuscripts Agent Pause Service Pause Contractor Phones: Pause Service Malling Address (Inc.) Project Section 12	CRY/State/Zip: Contractor Phones: Agent Mailing Address (include City/State/Zip): Bill: 2	Owner(s): (If there are Multiple Owners Authorized Agent:	I (we) declare that this application (incluam (are) responsible for the detail and may be a result of Bayfield County rely above described property at any reason	O Secretarial Staff			The day of the least on the	AND THE PROPERTY OF THE PROPER	☐ Municipal Use				Commercial Use			Residential Use			Proposed Use マ		Proposed Construction:	Fxisting Structure: //f permit-	DELL	Property	□ Relocati	X000 Conversion		□ New Co	me ion e &	wyrongremia	NoA-Stockand		Shoreland Creek or L		Section, Township	NN 1/4, NE 1/4	LOCATION Legal Description:		Authorized Agent: (Person Signing A	Arthorizad Agost (Daron Sixing A	Contractor:	Address of Property	UASSI CICAL	
City/State/Zip: Contractor Phone: Agent Phone: Agent Mailing Address Agent Mailing Address CSM Vol & Page Lotts) No. Townof: W Townof: Townof: W Townof: W Townof: W Townof: W Townof: W Townof: Townof: W Distance Structure For Seasonal Sea	CRY/State/Zip: Contractor Phones: Agent Mailing Address (include City/State/Zip): Bill: 2	isted on the Deed All O	rAILURE: LOOB A iding any accompanying infor accuracy of all information I (withing on this information I (withing on the for the purpose of	アペイトの	Other: (explain)	Special Use! (&		Accessory Buil	Accessory Built	Addition/Alter	Mobile Home	Bunkhouse w/	Wii	WI	wit	wit		Principal Struc	N		0 177	reing applied for is rel	響		7	1 🖂	ă	X				erty/Land within 1000	erty/Land within 300 i andward side of Floo		50				ppittä don on benall of Ow		بتم)	LTE	
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Attach

Copy of Tax Statement

If you recently purchased the property send your Recorded Deed

Address to send permit

(If you are signing on behalf of the owner(s) a letter of authorization must accompany this application)

Hold For Sanita	Condition(s):To	Was Proposed Bu Inspection Record: NPVI A H Date of Inspection:	Granted by Variance (B.O.A.) Tyes (No. Parroll For	Permit Denied (Date): Permit #: // O Is Parcel a Sub-St Is Parcel in Common Is Structure Non-C	Issuance Inf	Prior to the placement other previously surve prior to the placement one previously surveys marked by a licensed s	Setback to Septic Tanl Setback to Drain Field Setback to Privy (Port	Setback from the Setback from the	Setback from 1		Please comp		2		(7) (6) (7) (7)
~ \	Condition(s):Town, Committee or Board Conditions Attached? UNC PENNET + WESPE [D Cattern on the Pierre Person of Inspector:	was Proposed Building Site Delineated spection Record: 90 Ft to NAMIA HBUE COESTITUTE CO	riance (B.O.A.)	vermit Denied (Date): ermit #: //o -/OSS8 Is Parcel a Sub-Standard Lot Is Parcel in Common Ownership Is Structure Non-Conforming		And of the control of	B C	Setback from the South Lot Line Setback from the West Lot Line Setback from the East Lot Line	Setback from the Centerline of Platted Road Setback from the Established Right-of-Way Setback from the North Lot Line	Description	0			·) Show Location of:) Show / Indicate:) Show Location of (*):) Show:) Show:) Show:) Show any (*):) Show any (*):
Hold For TBA	r Bgard Condition	ineated res		□ Yes (Deed of □ Yes (Fused)	ICE: All Land Use truction Of New C The k	no ri a structure within ten (10) feetc marked by a licensed surveyor at the marked by a licensed surveyor at the on of a structure more than ten (10) for each ther previously surveyed corner, o cowner's expense.	Tank sting		Platted Road light-of-Way		te (1) – (7) above (prior to continuing) Setbacks: (measured to the closest point)	WEST	Proferm	Linse	of (*):
×.		REQUIREDANCE		Reason for Denial: Permit Date: 42 (Deed of Record)	NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun. Construction Of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code. The local Town, Village, City, State or Federal agencies may also require permits. (County Use Only) Sanitary Number: # of bedrooms: Sanitary Date:	construction of a structure within ten (10) feet of the minimum required setback, the boundary line from which the setback must be measured must be wisible from one previously surveyed corn construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible corners to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must eyor at the owner's expense. **Charles or Mark Bronned Location (6) of New Construction Sentic Tank (CT) Drain field (DE) Holding Tank (HT) Drivy (D) and Well (WI)	ことで	1700	3 t	Measurement	ntinuing) closest point)			17	Proposed Construction North (N) on Plot Plan (*) Driveway and (*) Frontage Road (Name Frontage Road) All Existing Structures on your Property (*) Well (W); (*) Septic Tank (ST); (*) Drain Field (DF); (*) Holding Tank (HT) and/or (*) Lake; (*) River; (*) Stream/Creek; or (*) Pond (*) Wetlands; or (*) Slopes over 20%
Hold For Affidavit	A Series	C 2 =	-	S S S	ne (1) Year from th Dwelling: ALL Mu ,, City, State or Fed Number:	quired sethack, the bou	Feet Feet Feet	Feet Feet	Feet Feet	rement	M	Slove		The Pool of	on n Frontage Road (Frontage
	(If No they need to be at S) FE GUL	PAROLAGAR	Dreviously Granted by Variance (B.O.A.) O Yes Z No. Ware Preparty Lines Represented by	Witigation Attached	e Date of Issuance nicipalities Are Re eral agencies may	ndary line from which the minimum required setback corrected compass from the corrected compass from the Carlo Car		Setback from Wetland 20% Slope Area on property Elevation of Floodplain	Setback from the Setbac		<u> </u>	Propuses To/CASIN	NA SON	7 1851 Penasa	Name Frontage F ty Drain Field (DF); or (*) Pond
Hold For Fees:	attached.) Locatu Jacatu	Was Property Surveyed The Othern UF A SCE7-14-15 15751	by Variance (B.O.	res V	if Construction o quired To Enforce also require pern	ne setback must be mea ack, the boundary line fi m a known corner withi	-	etland on property odplain	Setback from the Lake (ordinary high-water Setback from the River, Stream, Creek Setback from the Bank or Bluff	Description	Changes in plans must be approv	P 2°	NEV SECTION OF SECTION	185/ 72 J	toad) (*) Holding Tank
	976	20 17	Case #:	No Affida	r Use has not beg The Uniform Dw nits.	measured must be visible to me from which the setback within 500 feet of the propo			high-water mark) Creek			3M W2	son Tro		
	Date of Approval:	Oning District (A) Lakes Classification (B) Date of Re-Inspection:	X		t begun. n Dwelling Code. Sanitary Date:	sible from one previously surveyed corner to stback must be measured must be visible from proposed site of the structure, or must be proposed site of the structure.		\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\		Mea	ed by the Planning & Zoning Dept.			Verman de la composition della	*) Privy (P)
1944		mi unrell	No.	200 Sa		isty surveyed corner to the ed must be visible from tructure, or must be	Feet	Feet □ No	3	Measurement	& Zoning Dept.		Λ		

SUBMIT: COMPLETED APPLICATION, TAX Washburn, WI 54891 (715) 373-6138 Bayfield County
Planning and Zoning Depart.
PO Box 58

APPLICATION FOR PERMIT

BAYFIELD COUNTY, WISCONSIN

APR 18 2016

ENTERED ermit #: Refund: Amount Paid: 4.29-16 Muas 6-007 7-83-16

INSTRUCTIONS: No permits will be issued until all fees are paid.

Checks are made payable to: Bayfield County Zoning Department.

DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANT.

CONTEST CONTEST NOT ISS Authorized Agent: (Person Sig PROJECT LOCATION Section 1/4, Section 1/4, Section 1/4, Section Section Is Cree of Completion Include at Time of Completion Include donated time & Me donated time & Gree Shoreland Non-Shoreland Is Cree Of Completion Include donated time & Gree Add Ne Gree Re Skisting Structures: (If po	SSUED 4ET Son Signing Application on behavior in the legal Description: (Use	half of Owner(s)) Tax Statement) Tax Statement) N, Range O N, Range O thin 300 feet of Rive le of Floodplain? thin 1000 feet of Lak # of Storile and/or basen N 1-Story n O 1-Story	of the page of the	Plumber: CADY Flument Agent Mailing Address (Included September) Lot(s) No. Block(s) Distance Structure is from the september of the september of the september se			Plumber Phone: 716-373-3375 Written Authorization Attached Yes No Document: (i.e. Property Ownership) Page(s) Page(s) Acreage Acreage O. 453 Is Property in Floodplain Zone? Present? Yes Yes No No X.No X.No City City O. 453 O. 454 O
	gning Application or I Description: I Description: Township Property/Land ek or Landward Property/Land Property/Land Property/Land Adition/Altera	Agen Agen	of: Page	Lot(s) No. Distance Struc Distance Struc Distance Struc Distance Struc Distance Struc	Pess (include City/s Pess (inc		Jocument: (1. Pit Att At
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APPLICANT - PLEASE COMPLETE PLOT PLAN ON REVERSE SIDE

Attach
Copy of Tax Statement
If you recently purchased the property send your Recorded Deed

Date

Date

13

SOK

Owner(s): (If there are Multiple O

Owners

1sted on the Deed

All Owners must sign or letter(s) of authorization must accompany this application)

Authorized Agent:

(If you are signing on behalf of the owner(s) a letter of authorization must accompany this application)

Address to send permit

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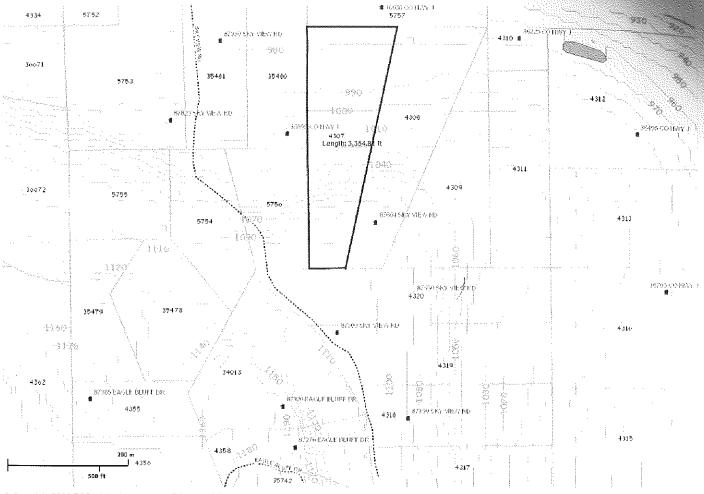
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10-ft. Contour Map Outer View Ridge Lot 1



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